

## State of South Dakota

# Candidate's or Committee's Report of Receipts and Expenditures

RECEIVED Candidates and candidate committees: File in the office where you filed your nominating petition. OCT 23 2006 PACs, political party, ballot question and other committees: File with Elections Department, Secretary of State's Office, 500 E Capitol Ave., Pierre, SD 57501-5070 S.D. SEC. OF STATE. See pages 9 & 10 of the Guideline Book for specific instructions on completing this report. NATIONAL ASSOCIATION OF TOBACCO OUTLETS, INC. Name of Candidate or Committee 15560 BOULDER POINTE ROAD, EDEN PRAIRIE, MN Complete Mailing Address \_\_\_\_\_Daytime Phone Number 952-974-0075 THOMAS BRIANT Name of Person Making Report If you are a candidate, what office are you seeking? If you are a ballot question committee, indicate which measure(s) the committee was involved with during the reporting period and whether the measure was supported or opposed. NATO IS A NON PROFIT CORPORATION, NOT A COMMITTEE: INITIATED MEASURE @ PRE GENERAL Type of Report (See pages 4 & 5 of Guideline Book) For Reporting Period Ending (See pages 4 & 5 of Guideline Book) OCTOBER 28,2006 The following verification must be completed before submitting report. VERIFICATION OF PERSON MAKING REPORT THOMAS A. BRIANT (print name legibly), certify that I have examined this report and to the best of my knowledge and belief it is true, correct and complete. Date: 10/19/2006 Candidate Signature or Signature of Committee Treasurer or Chairperson Revised July 2001

| Name of Candidate or Committee | NATIONAL | ASSOCIATION | OF | TOBACCO | OUTLETS, | INC |
|--------------------------------|----------|-------------|----|---------|----------|-----|
|                                |          |             |    |         |          |     |

For the reporting period ending OCTOBER 28, 2006

## Schedule A – Direct Contributions

This schedule is used for reporting all direct contributions. You must keep a record of all contributors, but for this report you may combine all contributions of \$100 or less from individuals and the same from political parties and enter these sums as unitemized contributions on their respective lines below and on the next page. Any contribution of more than \$100 or aggregate during a calendar year from an individual or political party and all contributions from PAC's must be entered as a separate item (itemized) giving the amount, name, address and place of employment (if applicable) of the contributor. Each type of contributor has their own section for itemization. This schedule may be duplicated if you need more space, or you may attach additional sheets of paper.

| zed Contributions from I  Name | Residence Address | Place of Employment<br>(Name of Employer)        | _           |
|--------------------------------|-------------------|--|-------------|
|                                |                   |  | <b>s</b>    |
|                                |                   |  | \$          |
|                                |                   |  | s           |
|                                |                   |  | \$          |
|                                |                   |  | \$          |
|                                |                   |  | s           |
|                                |                   |  | \$          |
|                                | 4 4               |  | s —         |
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|                                |                   |  | s           |
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|                                |                   |  | <b>⋠</b> —— |
|                                | 1                 |  |             |
|                                |                   |  | \$          |
|                                |                   |  |             |
|                                |                   | <del>                                     </del> | \$          |
|                                |                   | -  | _ \$        |
|                                |                   |  | - \$        |
|                                |                   |  |             |
|                                |                   |  | - S         |
|                                |                   |  |             |

Total of Itemized Contributions from Political Action Committees:

**s** \_\_\_\_\_

NONE

\$

Total of All Direct Contributions (Sum of all lines with an \*)

|   |   |         | •   |                                       |               |                |                                    | ndix B        |
|---|---|---------|---|---------------------------------------|---------------|----------------|------------------------------------|---------------|
| Name of Candidate or Committee:_  |   |         | ASSOCIATION                               | OF                                    | TOBACCO       | ) C            | UTLETS,                            | INC.          |
| For the reporting period ending:  | OCTOBER   | 28,     | 2006                                      |                                       |               |                |                                    |               |
|   | le B - Fun<br>to raise money<br>ribution result | d-R     | Laising Events I                          | et proc                               | ceeds derived | fron<br>cal    | n each event. I<br>endar year, tho | fa<br>se      |
| Type or Name of Event   | . <u></u> .                                     |         |   | · · · · · · · · · · · · · · · · · · · |               | 1              | let Proceeds                       |               |
|   |   |         |   |                                       |               |                |                                    | -             |
|   |   |         |   |                                       |               |                |                                    | -             |
|   |   |         |   |                                       |               | ļ              |                                    | -<br>-        |
|   |   |         |   |                                       |               |                |                                    | -             |
|   |   |         |   |                                       | Total:        | <u> </u><br>\$ | NONE                               |               |
| *   |   |         |   |                                       |               | Ψ_             |                                    | -             |
| Sch<br>Report all non-cash contributions of goods or<br>of the contributor, residence address and place | services and th                                 | he est  |   |                                       |               | eeds           | s \$100, the nam                   | e             |
| Nature of Non-Cash Contribution   |   | Na      | me, Residence Addre<br>Place of Employmen |                                       |               | Es             | timated Value                      |               |
|   |   |         |   |                                       |               |                |                                    | <b>-</b><br>- |
|   | •   |         |   | •                                     |               | -              |                                    | -             |
|   |   |         |   |                                       |               |                |                                    | -             |
|   |   |         |   |                                       |               |                |                                    | <b>-</b>      |
|   |   |         |   |                                       |               | $\vdash$       |                                    | -             |
|   | é   |         |   |                                       | Total:        | \$             | NONE                               | <u>-</u>      |
|   | Schedule  | e D ·   | - Other Income                            |                                       |               |                |                                    |               |
| Use this schedule to report any refunds, interest   | est earned or of                                | ther in | ncome which is not a d                    | irect c                               | ontribution.  |                |                                    |               |
| Source of Income  |   | ,       |   |                                       |               | _              | Amount                             | -             |
|   |   |         |   |                                       |               |                |                                    | -<br>-        |
|   |   |         |   |                                       |               | $\vdash$       |                                    | -             |
|   |   |         |   |                                       |               | _              |                                    | -             |
|   |   |         |   |                                       |               |                |                                    | -<br>-        |
|   |   |         |   |                                       |               | <b> </b>       |                                    | -             |
|   |   |         |   |                                       | Total         | \$             | NONE                               | <del>-</del>  |

|                                 |          |             |    |         | * *      |      |
|---------------------------------|----------|-------------|----|---------|----------|------|
| Name of Candidate or Committee: | NATIONAL | ASSOCIATION | OF | TOBACCO | OUTLETS, | INC. |
|                                 |          |             |    |         |          |      |

For the reporting period ending:\_\_ OCTOBER 28, 2006

expenses. All other expenses should be listed. All contributions to candidates and committees must be listed individually.

| Expenses           |                    | Contributions Made to Candidates and Committees |                      |  |
|--------------------|--------------------|---|----------------------|--|
| [tem               | Amount             | Name of Candidate or Committee                  | Amount               |  |
| Advertising        |                    |   |                      |  |
| Consulting         |                    |   |                      |  |
| Postage            |                    |   |                      |  |
| Printing           | 202.28             |   |                      |  |
| Rent               |                    |   |                      |  |
| Salaries           |                    |   |                      |  |
| Telephone          |                    |   |                      |  |
| Travel             |                    |   |                      |  |
| Utilities          |                    |   |                      |  |
|                    |                    | <u> </u>  |                      |  |
| List other expense | List other expense | 1.1   |                      |  |
| items below        | amounts below      |   |                      |  |
|                    |                    |   |                      |  |
| <u> </u>           |                    |   |                      |  |
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|                    |                    |   |                      |  |
| 1                  |                    |   | enditures: \$ 202.28 |  |

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|   |    |    |    |   |   |

| Land Constitution Committee      | NATIONAL | ASSOCIATION | OF | TOBACCO | OUTLETS, | INC. |
|----------------------------------|----------|-------------|----|---------|----------|------|
| Name of Candidate or Committee:_ |          |             |    |         |          |      |

For the reporting period ending: OCTOBER 28, 2006

Schedule F - Debts and Obligations

This schedule is to report all of the candidate's campaign obligations which are unpaid at the end of the reporting period. If a service has been contracted but not billed, estimate the amount of the obligation.

| Owed to:   | Purpose:           | Amount                                 |
|--|--------------------|--|
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|  | Total Obligations: | ¢ NONE                                 |
|  | Total Ubligations: | \$ NONE                                |

Name of Candidate or Committee: NATIONAL ASSOCIATION OF TOBACO OUTLETS, INC.

For the reporting period ending: OCTOBER 28, 2006

**Summary Page** 

This summary sheet will give a brief outline of all campaign finance activity during this reporting period. Please transfer all totals from the schedules previously completed.

| 1. | Amount on hand, if any, at the beginning  | of the reporting period;      | \$        |
|----|---|-------------------------------|-----------|
| 2. | Receipts  | KIW 10-23-05                  | 4         |
|    | Schedule A - Direct Contributions   | s 202.28                      | 9         |
|    | Schedule B - Fund-Raising Events  | \$                            |           |
|    | Schedule C - In Kind Contributions  | <b>\$</b>                     |           |
|    | Schedule D - Other Income   | \$                            |           |
|    | Total of all Receipts   | \$                            |           |
| 3. | Total Monetary Receipts (A+B+D)   |                               | \$00      |
| 4. | Candidate's Personal Contribution to Ow   | vn Campaign                   | \$        |
| 5. | Monetary Loans to Candidate or Commi  | ittee During Reporting Period | \$        |
| 6. | Monetary Loans Repaid During Reporting  | ng Period                     | \$        |
| 7. | Expenditures - Schedule E   |                               | \$ 202.28 |
| 8. | Unpaid Obligations - Schedule F   | \$                            |           |
| 9. | Amount on hand at the close of this repo<br>This should equal lines (1+3+4+5) – (6+ |                               | \$        |
|    |   |                               |           |

\*The association used its existing funds to pay for these costs.

\$202.28